



Specialty Independent Review Organization

Notice of Independent Review Decision

Date notice sent to all parties: 3/27/2015

IRO CASE #:

DESCRIPTION OF THE SERVICE OR SERVICES IN DISPUTE:

The item in dispute is the prospective medical necessity of Seroquel 200 mg (tablet) SIG-1 P0 Q HS #90 tablets substitutions allowed and Klonopin 0.5 mg tablet SIG ½ 0 q bid and 2 hs #270 tablets substitutions allowed.

A DESCRIPTION OF THE QUALIFICATIONS FOR EACH PHYSICIAN OR OTHER HEALTH CARE PROVIDER WHO REVIEWED THE DECISION:

The reviewer is a Medical Doctor who is board certified in Internal Medicine.

REVIEW OUTCOME:

Upon independent review, the reviewer finds that the previous adverse determination/adverse determinations should be:

- ☐ Upheld (Agree)
- ☒ Overturned (Disagree)
- ☐ Partially Overturned (Agree in part/Disagree in part)

The reviewer disagrees with the previous adverse determination regarding the prospective medical necessity of Seroquel 200 mg (tablet) SIG-1 P0 Q HS #90 tablets substitutions allowed. Klonopin 0.5 mg tablet SIG ½ 0 q bid and 2 hs #270 tablets substitutions allowed.

PATIENT CLINICAL HISTORY [SUMMARY]:

The claimant is a xx-year-old with major depressive disorder related to a traumatic brain injury suffered in xxxx that has resulted in cortical blindness, bipolar disorder, impulse control disorder, panic disorder, and tremors. He has been treated since at least 2008 with Seroquel 200 mg and Klonopin 0.5 mg. Office notes have indicated that the claimant's anxiety and agitation have stabilized and are controlled since Klonopin was initiated. Other medications in addition to Seroquel and Klonopin include Depakote and Cymbalta. The provider documented in the 9/24/14 office note that when Klonopin was held due to a lack of insurance coverage, the claimant's agitation, irritability, and outbursts worsened, and that these issues improved when the medication was restarted.

The same note details that the claimant's paranoia had abated with initiation of Seroquel.

ANALYSIS AND EXPLANATION OF THE DECISION INCLUDE CLINICAL BASIS, FINDINGS, AND CONCLUSIONS USED TO SUPPORT THE DECISION:

Official Disability Guidelines do not address treatment of depression, agitation, or other neurologic/psychiatric complications of a traumatic brain injury. However, Klonopin is FDA approved for treatment of panic disorder, which the documentation indicates this claimant has. In addition, when Klonopin was withdrawn from the claimant's regimen, his agitation, irritability, and outbursts worsened. When the drug was reintroduced, these symptoms improved markedly. Seroquel additionally has FDA approval for treatment of bipolar disorder and major depressive disorder, both of which the records indicate this claimant has. In addition, paranoia, which was present while the claimant was off Seroquel, resolved completely after the drug was initiated. In summary, Seroquel 200 mg and Klonopin 0.5 mg are both medically necessary.

A DESCRIPTION AND THE SOURCE OF THE SCREENING CRITERIA OR OTHER CLINICAL BASIS USED TO MAKE THE DECISION:

- ☐ ACOEM- AMERICAN COLLEGE OF OCCUPATIONAL & ENVIRONMENTAL MEDICINE UM KNOWLEDGEBASE
- ☐ AHCPR- AGENCY FOR HEALTHCARE RESEARCH & QUALITY GUIDELINES
- ☐ DWC- DIVISION OF WORKERS COMPENSATION POLICIES OR GUIDELINES
- ☐ EUROPEAN GUIDELINES FOR MANAGEMENT OF CHRONIC LOW BACK PAIN
- ☐ INTERQUAL CRITERIA
- ☒ MEDICAL JUDGEMENT, CLINICAL EXPERIENCE, AND EXPERTISE IN ACCORDANCE WITH ACCEPTED MEDICAL STANDARDS
- ☐ MERCY CENTER CONSENSUS CONFERENCE GUIDELINES
- ☐ MILLIMAN CARE GUIDELINES
- ☒ ODG- OFFICIAL DISABILITY GUIDELINES & TREATMENT GUIDELINES
- ☐ PRESSLEY REED, THE MEDICAL DISABILITY ADVISOR
- ☐ TEXAS GUIDELINES FOR CHIROPRACTIC QUALITY ASSURANCE & PRACTICE PARAMETERS
- ☐ TEXAS TACADA GUIDELINES
- ☐ TMF SCREENING CRITERIA MANUAL
- ☐ PEER REVIEWED NATIONALLY ACCEPTED MEDICAL LITERATURE (PROVIDE A DESCRIPTION)
- ☒ OTHER EVIDENCE BASED, SCIENTIFICALLY VALID, OUTCOME FOCUSED GUIDELINES (PROVIDE A DESCRIPTION)

Physicians Desk Reference, 2015 edition
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